PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

appropriate All further indicated unless correct maintenance fee notifica	correspondence includir ted below or directed oth	ng the Patent, advance of herwise in Block 1, by (a	Fee(e: A certificate of mailings) Transmittal This cert	e mailed to the current or (b) indicating a sepa and can only be used for ificate cannot be used for er, such as an assignmen	correspondence address as	
7590 05/09/2007 Paul A. Leipold Patent Legal Staff Eastman Kodak Company				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
343 State Street Rochester, NY 14650-2201				(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/317,536 TITLE OF 'NVENTION	04/01/2004 N: OLED DISPLAY WIT	H CIRCULAR POLARIZ	Ronald S. Cok ZER		85285A S H S	4880	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprevisional	NO	\$1400	\$300	\$0	\$1700	08/09/2007	
EXAN	MINER	ART UNIT	CLASS-SUBCLASS				
FARAHA	NI, DANA	2891	257-040000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB.47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
			THE PATENT (print or typ	,			
PLEASE NOTE: Un recordation as set for	less an assignee is identi th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the partial substitute for filing an a	atent. If an assignee is assignment.	identified below, the do	cument has been filed for	
(A) NAME OF ASSI	0		(B) IGBOIDE (CE: (CII I	und billing on cool.	TRY)		
	343 STAT	ESTREET, ROCI	HESTER, NY 1465	50-2201			
Please check the appropr	``		inted on the patent):		tion or other private gro	up entity Government	

Please check the appropriate assignce category or categories (will not be	printed on the patent):
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies	4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 25-0 235 (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be acceptinterest as shown by the records of the United States Patent and Tradema	ted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.
Authorized Signature David A. Movais	is (lmg) Date July 17, 2007 Registration No. 33, 324

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

THE DALLA COLUMN AND CONTRACTOR OF CONTRACTO

Date Mailed: July 17, 2007

"FEE ADDRESS" INDICATION FORM

Address to:
Mail Stop M Correspondence
Eirector of the US Patent and Trademark Office
F.O. Box 1450
Alexandria. VA 22313-1450

Flease recognize as the "F	ee Address" under the provisi	ions of 37 CFR 1.363 the fo	llowing address:						
MASTER DATA 300 Franklin Ce 29100 Northwes Southfield, Mich	nter								
Customer Number if assign	ed <u>01333</u>								
in the following listed application(s) or patent(s) for which the Issue Fee has been paid.									
PATENT NUMBER (if known)	SERIAL NUMBER 10/817,536	PATENT DATE (if known)	U.S. FILING DATE 4/1/2004						
PLEASE VOID ALL PREVIOUS FEE ADDRESSES. THANK YOU.									
Typed name of person signing David A. Novais									
Signed David a. Novais Amy)									
(check one) Owner of record									
	X Owner's attorne	y or agent of record	33,324 (Reg. No.)						